

01-04-02

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| UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i> | | Attorney Docket No. N00389/70006 RJP |
| First Named Inventor or Application Identifier | | |
| Burakoff et al. | | |
| Express Mail Label No. | EL844518657US | |
| Date of Deposit | November 9, 2001 | |

JC920 U.S. PTO
11/09/01

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| APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i> | | ADDRESS TO: Box Patent Application Assistant Commissioner for Patents Washington, DC 20231 |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Specification [Total pages 22] 14 - pages specification 1 - pages abstract 7 - pages claims 33 - Total claims 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total sheets 3] <input checked="" type="checkbox"/> Informal <input type="checkbox"/> Formal [Total drawings 3] | | 6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies |
| ACCOMPANYING APPLICATION PARTS | | |
| 4. <input checked="" type="checkbox"/> Oath or Declaration [Total pages 4] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Unsigned c. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 5 below]</i> i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | | |
| 5. <input type="checkbox"/> Incorporation by Reference <i>(usable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | | |
| 8. <input checked="" type="checkbox"/> Assignment Papers/cover sheet & documents(s) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation of Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 14. <input checked="" type="checkbox"/> Small Entity Statement(s) <input checked="" type="checkbox"/> Statement filed in prior application, Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> | | |
| 16. Other: | | |

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: 09/023,039 filed on February 12, 1998

- Cancel in this application original claims of the prior application before calculating the filing fee.
 Amend the specification by inserting before the first line the sentence:

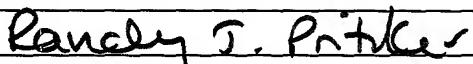
This application is a continuation divisional of application serial no 09/023,039 filed on February 12, 1998, Obtaining Consent for Electronic Delivery of Compliance Information, and now pending.

18. CORRESPONDENCE ADDRESS

Correspondence address below

| | | | | | |
|------------------------|------------------------------------|------------------|----------------|------------|----------------|
| ATTORNEY'S NAME | Randy J. Pritzker, Reg. No. 35,986 | | | | |
| NAME | Wolf, Greenfield & Sacks | | | | |
| ADDRESS | 600 Atlantic Avenue | | | | |
| CITY | Boston | STATE | MA | ZIP | 02210 |
| COUNTRY | USA | TELEPHONE | (617) 720-3500 | FAX | (617) 720-2441 |

19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

| | |
|------------------|---|
| NAME | Randy J. Pritzker, Reg. No. 35,986 |
| SIGNATURE |  |
| DATE | November 9, 2001 |

Inventor or Identifier: Burakoff et al.

Serial No: Not yet assigned

Filed: Herewith

For: OBTAINING CONSENT FOR ELECTRONIC DELIVERY
OF COMPLIANCE INFORMATION

CHECK BOX, if applicable:

 DUPLICATE

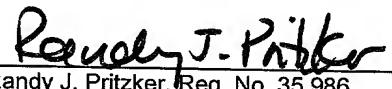
Fee Calculation Sheet

| CLAIMS | FOR | NUMBER FILED | NUMBER EXTRA | RATE | Fee |
|--------|--|--------------|----------------------------------|-------------|-------------|
| | TOTAL CLAIMS (37 CFR 1.16(c)) | 33-20= | 13 x | \$18 | = \$ 234.00 |
| | INDEPENDENT CLAIMS (37 CFR 1.16(b)) | 9-3= | 6 x | \$84 | = \$ 504.00 |
| | MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) + | | \$260 | = \$ | |
| | | | BASIC FEE (37 CFR 1.16(a)) | \$ 740.00 | |
| | | | Total of above Calculations = | \$ 1,478.00 | |
| | Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28). | | | \$ 739.00 | |
| | Assignment Recordation Fee (if any) | | | \$ | |
| | Other Fees (if any). | | | \$ | |
| | | | TOTAL = | \$ 739.00 | |

1. The fee may be charged to deposit account No. 23/2825.

General Authorization to Charge Deposit Account and General Request for Extension of Time

2. a. If the filing of any paper in this application necessitates the payment of a fee under 37 CFR §§ 1.16 or 1.17 or 1.18, and the fee due is in an amount different from any enclosed check or if no check is enclosed, the Commissioner is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account No. 23/2825.
- b. The applicant hereby revokes any prior authorization to charge a fee due under 37 CFR §§ 1.16 or 1.17 or 1.18.
3. If the filing of any paper in this application necessitates an extension of time under 37 CFR §1.136(a), the applicant hereby requests such extension of time. If the fee due is in an amount different from any enclosed check or if no check is enclosed, the Commissioner is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account No. 23/2825.



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